

TRANSMITTAL FORM

Application Serial Number	10/607,703
Filing Date	June 27, 2003
First Named Inventor	Amundson
Group Art Unit	2873
Examiner Name	Hasan, Mohammed A.
Attorney Docket No.	INK-110
Patent No.	Not applicable
Issue Date	Not applicable


ENCLOSURES (check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Check Attached <input type="checkbox"/> Copy of Fee Transmittal Form <input checked="" type="checkbox"/> Amendment and Response <input type="checkbox"/> Preliminary <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Letter to Official Draftsperson including Drawings [Total Sheets _____] <input type="checkbox"/> Petition for Extension of Time <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Form PTO-1449 <input type="checkbox"/> Copies of IDS Citations <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Sequence Listing submission <input type="checkbox"/> Paper Copy/CD <input type="checkbox"/> Computer Readable Copy <input type="checkbox"/> Statement verifying identity of above	<input type="checkbox"/> Copy of Notice to File Missing Parts of Application (PTO-1553) <input type="checkbox"/> Formal Drawing(s) <input type="checkbox"/> Request For Continued Examination (RCE) Transmittal <input type="checkbox"/> Power of Attorney (Revocation of Prior Powers) <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Executed Declaration and Power of Attorney for Utility or Design Patent Application <input type="checkbox"/> Small Entity Statement <input type="checkbox"/> CD(s) for large table or computer program <input type="checkbox"/> Amendment After Allowance <input type="checkbox"/> Request for Certificate of Correction <input type="checkbox"/> Certificate of Correction (in duplicate)	<input type="checkbox"/> Notice of Appeal to Board of Patent Appeals and Interferences <input type="checkbox"/> Appeal Brief (in triplicate) <input type="checkbox"/> Status Inquiry <input checked="" type="checkbox"/> Return Receipt Postcard <input checked="" type="checkbox"/> Certificate of First Class Mailing under 37 C.F.R. 1.8 <input type="checkbox"/> Certificate of Facsimile Transmission under 37 C.F.R. 1.8 <input type="checkbox"/> Additional Enclosure(s) (please identify below)
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CORRESPONDENCE ADDRESS

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High Street Tower
125 High Street
Boston, MA 02110
Tel. No.: (617) 248-7000
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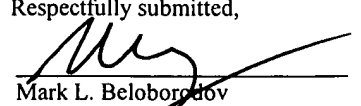
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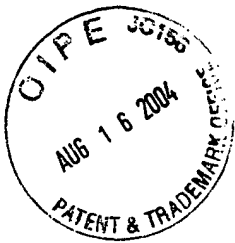
Respectfully submitted,

Mark L. Beloborodov
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High Street Tower
125 High Street
Boston, MA 02110

Date: August 12, 2004
Reg. No. 50,773
Tel. No.: (617) 248-7453
Fax No.: (617) 248-7100

 FEE TRANSMITTAL FY 2004	Complete if Known	
	Application Serial Number	10/607,703
	Filing Date	June 27, 2003
	First Named Inventor	Amundson
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METHOD OF PAYMENT	FEE CALCULATION (continued)																																																																																				
1. <input checked="" type="checkbox"/> Payment Enclosed: <input checked="" type="checkbox"/> Check <input type="checkbox"/> Money Order <input type="checkbox"/> Other	3. ADDITIONAL FEES <table style="width: 100%; border-collapse: collapse;"> <tr> <th style="width: 15%;">Large Entity Fee (\$)</th> <th style="width: 15%;">Small Entity Fee (\$)</th> <th style="width: 45%;">Fee Description</th> <th style="width: 25%;">Fee Paid</th> </tr> <tr><td>130</td><td>65</td><td>Surcharge - late filing fee or oath</td><td></td></tr> <tr><td>50</td><td>25</td><td>Surcharge - late provisional filing fee or cover sheet</td><td></td></tr> <tr><td>130</td><td>130</td><td>Non-English specification</td><td></td></tr> <tr><td>2,520</td><td>2,520</td><td>Request for ex parte reexamination</td><td></td></tr> <tr><td>110</td><td>55</td><td>Extension for reply within first month</td><td></td></tr> <tr><td>420</td><td>210</td><td>Extension for reply within second month</td><td></td></tr> <tr><td>950</td><td>475</td><td>Extension for reply within third month</td><td></td></tr> <tr><td>1480</td><td>740</td><td>Extension for reply within fourth month</td><td></td></tr> <tr><td>2010</td><td>1005</td><td>Extension for reply within fifth month</td><td></td></tr> <tr><td>330</td><td>165</td><td>Notice of Appeal</td><td></td></tr> <tr><td>330</td><td>165</td><td>Filing a brief in support of an appeal</td><td></td></tr> <tr><td>290</td><td>145</td><td>Request for oral hearing</td><td></td></tr> <tr><td>130</td><td>130</td><td>Petitions to the Commissioner</td><td></td></tr> <tr><td>180</td><td>180</td><td>Submission of Information Disclosure Statement</td><td></td></tr> <tr><td>770</td><td>385</td><td>Filing a submission after final rejection (37 CFR 1.129(a))</td><td></td></tr> <tr><td>770</td><td>385</td><td>For each additional invention to be examined (37 CFR 1.129(b))</td><td></td></tr> <tr><td>100</td><td>100</td><td>Certificate of Correction for applicant's error</td><td></td></tr> <tr><td>110</td><td>55</td><td>Submission of Terminal Disclaimer</td><td></td></tr> <tr><td colspan="3">Other fee (Specify)</td><td></td></tr> <tr><td colspan="3">Other fee (Specify)</td><td></td></tr> </table>	Large Entity Fee (\$)	Small Entity Fee (\$)	Fee Description	Fee Paid	130	65	Surcharge - late filing fee or oath		50	25	Surcharge - late provisional filing fee or cover sheet		130	130	Non-English specification		2,520	2,520	Request for ex parte reexamination		110	55	Extension for reply within first month		420	210	Extension for reply within second month		950	475	Extension for reply within third month		1480	740	Extension for reply within fourth month		2010	1005	Extension for reply within fifth month		330	165	Notice of Appeal		330	165	Filing a brief in support of an appeal		290	145	Request for oral hearing		130	130	Petitions to the Commissioner		180	180	Submission of Information Disclosure Statement		770	385	Filing a submission after final rejection (37 CFR 1.129(a))		770	385	For each additional invention to be examined (37 CFR 1.129(b))		100	100	Certificate of Correction for applicant's error		110	55	Submission of Terminal Disclaimer		Other fee (Specify)				Other fee (Specify)			
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2. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to credit or charge any fee indicated below for this submission to Deposit Account No. 20-0531. <input type="checkbox"/> Required Fees (copy of this sheet enclosed). <input checked="" type="checkbox"/> Additional fee required under 37 CFR 1.16 and 1.17. <input checked="" type="checkbox"/> Overpayment Credit.																																																																																					
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FEE CALCULATION 1. FILING FEE <table style="width: 100%; border-collapse: collapse;"> <tr> <th style="width: 15%;">Large Entity Fee (\$)</th> <th style="width: 45%;">Fee Description</th> <th style="width: 40%;">Fee Paid</th> </tr> <tr><td>770</td><td>Utility filing fee</td><td></td></tr> <tr><td>340</td><td>Design filing fee</td><td></td></tr> <tr><td>160</td><td>Provisional filing fee</td><td></td></tr> </table> <table style="width: 100%; border-collapse: collapse;"> <tr> <th style="width: 15%;">Number Filed</th> <th style="width: 15%;">Number Extra</th> <th style="width: 15%;">Rate</th> <th style="width: 15%;">Amount</th> </tr> <tr> <td>Total Claims</td> <td>- 20 =</td> <td>x \$ 18.00 =</td> <td></td> </tr> <tr> <td>Independent Claims</td> <td>- 3 =</td> <td>x \$ 86.00 =</td> <td></td> </tr> <tr> <td colspan="3"><input type="checkbox"/> Multiple Dependent Claim(s), if any</td> <td>\$290.00 =</td> </tr> <tr> <td colspan="3" style="text-align: right;">TOTAL:</td> <td>.00</td> </tr> <tr> <td colspan="3" style="text-align: right;">SMALL ENTITY DISCOUNT:</td> <td></td> </tr> <tr> <td colspan="3" style="text-align: right;">SUBTOTAL (1)</td> <td>(\$).00</td> </tr> </table> 2. AMENDMENT CLAIM FEES <table style="width: 100%; border-collapse: collapse;"> <tr> <th style="width: 10%;">Claims Remaining After Amend.</th> <th style="width: 10%;">Highest No. Previously Paid For</th> <th style="width: 10%;">Present Extra</th> <th style="width: 10%;">Rate</th> <th style="width: 10%;">Fee Paid</th> </tr> <tr> <td>Total 95</td> <td>- = 46</td> <td>49</td> <td>x \$ 18.00 =</td> <td>882.00</td> </tr> <tr> <td>Indep. 7</td> <td>- = 3</td> <td>4</td> <td>x \$ 86.00 =</td> <td>344.00</td> </tr> <tr> <td colspan="3"><input type="checkbox"/> First Presentation of Multiple Dep. Claim</td> <td>+ \$290.00 =</td> <td></td> </tr> <tr> <td colspan="4" style="text-align: right;">TOTAL:</td> <td>(\$).1,226.00</td> </tr> <tr> <td colspan="4" style="text-align: right;">SMALL ENTITY DISCOUNT:</td> <td>(\$).613.00</td> </tr> <tr> <td colspan="4" style="text-align: right;">SUBTOTAL (2)</td> <td>(\$).613.00</td> </tr> </table>	Large Entity Fee (\$)	Fee Description	Fee Paid	770	Utility filing fee		340	Design filing fee		160	Provisional filing fee		Number Filed	Number Extra	Rate	Amount	Total Claims	- 20 =	x \$ 18.00 =		Independent Claims	- 3 =	x \$ 86.00 =		<input type="checkbox"/> Multiple Dependent Claim(s), if any			\$290.00 =	TOTAL:			.00	SMALL ENTITY DISCOUNT:				SUBTOTAL (1)			(\$).00	Claims Remaining After Amend.	Highest No. Previously Paid For	Present Extra	Rate	Fee Paid	Total 95	- = 46	49	x \$ 18.00 =	882.00	Indep. 7	- = 3	4	x \$ 86.00 =	344.00	<input type="checkbox"/> First Presentation of Multiple Dep. Claim			+ \$290.00 =		TOTAL:				(\$).1,226.00	SMALL ENTITY DISCOUNT:				(\$).613.00	SUBTOTAL (2)				(\$).613.00										
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CORRESPONDENCE ADDRESS	SIGNATURE BLOCK
Direct all correspondence to: Patent Administrator Testa, Hurwitz & Thibault, LLP High Street Tower-125 High Street Boston, MA 02110 Tel. No.: (617) 248-7000 Fax No.: (617) 248-7100	Respectfully submitted, <div style="text-align: center;">  Mark L. Beloborodov Attorney for Applicant Testa, Hurwitz & Thibault, LLP High Street Tower 125 High Street Boston, MA 02110 </div> Date: August 12, 2004 Reg. No. 50,773 Tel. No.: (617) 248-7453 Fax No.: (617) 248-7100



DFW

PATENT
Attorney Docket No.: INK-110

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

APPLICANT: Amundson
SERIAL NO.: 10/607,703 GROUP NO.: 2873
FILING DATE: June 27, 2003 EXAMINER: Hasan, Mohammed A.
TITLE: ILLUMINATION SYSTEM FOR NONEMISSIVE
ELECTRONIC DISPLAYS

CERTIFICATE OF FIRST CLASS MAILING UNDER 37 C.F.R. 1.8

I hereby certify that this correspondence, and any documents referred to as enclosed herein, are being deposited with the United States Postal Service as first class mail, postage prepaid, in an envelope addressed to Mail Stop Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on this 12th day of August, 2004.

8/12/04
Date

Carrah Malone
Carrah Malone

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Submitted herewith are:

Transmittal Form (1 pg.); Fee Transmittal (1 pg.); Amendment and Response (15 pgs.); Appendix A (1 pg.); Check in the amount of \$613.00; this Certificate of First Class Mailing and return receipt postcard.



PATENT
Attorney Docket No.: INK-110
(2108/83)

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

APPLICANT: Amundson **CONFIRMATION NO:** 7924
SERIAL NO.: 10/607,703 **ART UNIT:** 2873
FILED: June 27, 2003 **EXAMINER:** Hasan, Mohammed A.
TITLE: ILLUMINATION SYSTEM FOR NONEMISSIVE ELECTRONIC DISPLAYS

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313

AMENDMENT AND RESPONSE

This paper is submitted in response to the pending Office Action mailed from the U.S. Patent and Trademark Office on May 20, 2004, for which the shortened statutory period set for response expires on August 20, 2004. Applicant encloses a check in the amount of \$622.00 in payment of the extra claims fee. Applicant believes that no extension-of-time or other fee is required for this Amendment and Response to be entered and considered. However, please consider this a conditional petition for the proper extension, if one is required, and a conditional authorization to charge any related extension fees or other fees necessary for entry and consideration of this paper to Deposit Account No. 20-0531.

Please make the following amendments, without prejudice, and consider the following remarks.

Amendments to the Claims are reflected in the listing of claims that begins on page 2 of this paper.

Amendments to the Drawings begin on page 13 of this paper.

Applicant's **Remarks** begin on page 14 of this paper.

Appendix A including one replacement sheet of drawings is attached following page 15 of this paper.